

## **EXHIBIT H**

**CUSTOMER CLAIM**

Claim Number \_\_\_\_\_

Date Received \_\_\_\_\_

**BERNARD L. MADOFF INVESTMENT SECURITIES LLC**

In Liquidation

**DECEMBER 11, 2008**

Irving H. Picard, Esq.  
Trustee for Bernard L. Madoff Investment Securities LLC  
Claims Processing Center  
2100 McKinney Ave., Suite 800  
Dallas, TX 75201

Provide your office and home telephone no.

OFFICE: N/A

HOME: 610-419-0303

Taxpayer I.D. Number (Social Security No.)

085-34-3379

~~ACCOUNT INFORMATION~~

Account Number: 1CM948

ROGER M PESKIN

AND DIANE PESKIN J/T WROS

51 EAST WALL STREET

BETHLEHEM, PA 18018

(If incorrect, please change)

**NOTE: BEFORE COMPLETING THIS CLAIM FORM, BE SURE TO READ CAREFULLY THE ACCOMPANYING INSTRUCTION SHEET. A SEPARATE CLAIM FORM SHOULD BE FILED FOR EACH ACCOUNT AND, TO RECEIVE THE FULL PROTECTION AFFORDED UNDER SIPA, ALL CUSTOMER CLAIMS MUST BE RECEIVED BY THE TRUSTEE ON OR BEFORE March 4, 2009. CLAIMS RECEIVED AFTER THAT DATE, BUT ON OR BEFORE July 2, 2009, WILL BE SUBJECT TO DELAYED PROCESSING AND TO BEING SATISFIED ON TERMS LESS FAVORABLE TO THE CLAIMANT. PLEASE SEND YOUR CLAIM FORM BY CERTIFIED MAIL - RETURN RECEIPT REQUESTED.**

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1. Claim for money balances as of ~~December 11, 2008~~:

a. The Broker owes me a Credit (Cr.) Balance of \$ - 0 -

b. I owe the Broker a Debit (Dr.) Balance of \$ - 0 -

c. If you wish to repay the Debit Balance, please insert the amount you wish to repay and attach a check payable to "Irving H. Picard, Esq., Trustee for Bernard L. Madoff Investment Securities LLC."

If you wish to make a payment, it must be enclosed with this claim form.

\$ -0-  
-0-

d. If balance is zero, insert "None."

2. Claim for securities as of December 11, 2008:

PLEASE DO NOT CLAIM ANY SECURITIES YOU HAVE IN YOUR POSSESSION.

	YES	NO
a. The Broker owes me securities	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. I owe the Broker securities	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. If yes to either, please list below:		

Date of Transaction (trade date)	Name of Security	Number of Shares or Face Amount of Bonds	
		The Broker Owes Me (Long)	I Owe the Broker (Short)
	<u>See attached schedule</u>	<u>\$3,247,367.40</u>	

Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or

information regarding any withdrawals you have ever made or payments received from the Debtor.

Please explain any differences between the securities or cash claimed and the cash balance and securities positions on your last account statement. If, at any time, you complained in writing about the handling of your account to any person or entity or regulatory authority, and the complaint relates to the cash and/or securities that you are now seeking, please be sure to provide with your claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.

**PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.**

**NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.**

	<u>YES</u>	<u>NO</u>
3. Has there been any change in your account since December 11, 2008? If so, please explain.	_____	_____X_____
4. Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?	_____	_____X_____
5. Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?	_____	_____X_____
6. Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	_____	_____X_____
7. Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.	_____	_____X_____
8. Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.	_____	_____X_____

9 Have you or any member of your family  
ever filed a claim under the Securities  
Investor Protection Act of 1970? if  
so, give name of that broker. \_\_\_\_\_ X

Please list the full name and address of anyone assisting you in the  
preparation of this claim form: G Robert Santyc, AJ Santyc & Co  
36 East Main Street Somerville NJ 08876

If you cannot compute the amount of your claim, you may file an estimated claim. In that  
case, please indicate your claim is an estimated claim.

IT IS A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM.  
CONVICTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR  
IMPRISONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.

THE FOREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY  
INFORMATION AND BELIEF.

Date 1/23/09 Signature Roger Pasquin  
Date 1/23/09 Signature Liane (Pasquin)

(If ownership of the account is shared, all must sign above. Give each owner's name,  
address, phone number, and extent of ownership on a signed separate sheet. If other  
than a personal account, e.g., corporate, trustee, custodian, etc., also state your capacity  
and authority. Please supply the trust agreement or other proof of authority.)

This customer claim form must be completed and mailed promptly,  
together with supporting documentation, etc. to:

Irving H. Picard, Esq.,  
Trustee for Bernard L. Madoff Investment Securities LLC  
Claims Processing Center  
2100 McKinney Ave., Suite 800  
Dallas, TX 75201

ROGER AND DIANE PESKIN  
ACCOUNT # 1-CM948

51 EAST WALL STREET  
BETHLEHEM PA 18018

SECURITY HOLDINGS AS OF 11/30/08 (LATEST DATE AVAILABLE)

DESCRIPTION	# SHARES	PRICE	VALUE 11/30/2008
FIDELITY SPARTAN US TREASURY MONEY MKT	13244	1	13244
US TREASURY BILL	675000	0.99971	674804.25
AT&T INC	4189	28.56	119637.84
ABBOTT LABORATORIES	1121	52.39	58729.19
AMGEN INC	767	55.54	42599.18
APPLE INC	649	92.67	60142.83
BANK OF AMERICA	3540	16.25	57525
CHEVRON CORP	1475	79.01	116539.75
CISCO SYSTEMS INC	4307	16.54	71237.78
CITIGROUP INC	3835	8.29	31792.15
COCA COLA CO	1416	46.87	66367.92
COMCAST CORP	2124	17.34	36830.16
CONOCOPHILIPS	1062	52.52	55776.24
EXXON MOBIL CORP	3717	80.15	297917.55
GENERAL ELECTRIC CO	7493	17.17	128654.81
GOOGLE	177	292.96	51853.92
HEWLETT PACKARD CO	1770	35.28	62445.6
INTEL CORP	4071	13.8	56179.8
IBM	1003	81.6	81844.8
J.P. MORGAN CHASE & CO	2655	31.66	84057.3
JOHNSON & JOHNSON	1947	58.58	114055.26
MCDONALDS CORP	828	58.75	48527.5
MERCK & CO	1534	26.72	40988.48
MICROSOFT CORP	5605	20.22	113333.1
ORACLE CORPORATION	2832	16.09	45566.88
PEPSICO INC	1121	56.7	63560.7
PFIZER INC	4779	16.43	78518.97
PHILIP MORRIS INTERNATIONAL	1475	42.16	62186
PROCTER & GAMBLE CO	2124	64.35	136679.4
QUALCOMM INC	1180	33.57	39612.6
SCHLUMBERGER LTD	885	50.74	44904.9
US BANCORP	1239	26.98	33428.22
UNITED PARCEL SVC INC	708	57.6	40780.8
UNITED TECHNOLOGIES CORP	708	48.53	34359.24
VERIZON COMMUNICATIONS	2006	32.65	65495.9
WAL MART STORES INC	1534	55.88	85719.92
WELLS FARGO & CO	2418	28.89	11589.42
SUBTOTAL-SECURITIES			2599439.1
S&P 100 INDEX DEC 430 CALL	5900	23.3	-137470
S&P 100 INDEX DEC 420 PUT	5900	16.5	97350
TOTAL			3247367.4



BERNARD L. MADOFF  
INVESTMENT SECURITIES LLC  
New York ☐ London

885 Third Avenue  
New York, NY 10022

212 230-2424

P&S Dept. 212 230-2436

800 334-1343

Fax 212 838-4061

WE HAVE THIS DAY CREDITED YOUR  
ACCOUNT WITH THE FOLLOWING:

11/13/08

CHECK WIRE

470,265.98

CLIENT'S ACCOUNT NUMBER

1-CM948-3

ROGER M PESKIN  
AND DIANE PESKIN J/T WROS  
51 EAST WALL STREET  
BETHLEHEM PA 18018



BERNARD L. MADOFF  
Investment Securities LLC

885 Third Avenue New York, NY 10022-4834

## Facsimile Transmittal

Date: \_\_\_\_\_ Pages: 1  
 To: \_\_\_\_\_ From: Frank DiPascali  
 Fax #: \_\_\_\_\_ Phone #: 212-230-2424  
 \_\_\_\_\_ Fax #: 212-638-4061

☐ Urgent

☒ Error Review

☐ Please Comment

☐ Please Reply

Notes:

## WIRE INSTRUCTIONS

JP Morgan Chase Bank

40 Wall Street

New York, NY 10015

ABA #: 021 000 021

For Further Credit To:

Bernard L. Madoff

Account #: 140 081 703

FBO: (Your account name) Roger + Drane  
 (Your account #) Peskin

1-CM948-3-0

\$ 470,365.98  
 100.00

470,265.98

\$ Total -

less \$100

.....



WACHOVIA

Wire Transfer of Funds  
Request

Preparer's Signature

059597

Authorized Signature

NSF Only

Account Status

Sufficient (Audio Checked)

Not Sufficient (NSF)

SUFFICIENT

NSF Source of Funds

Credit Approver Name (Please Print)

Credit Approver Signature

Date

Time of Call

Callback NO  
Required  
(Yes or No)

Initiator's Signature

Customer Accepting Call Back/Phone Number

Verifier's Signature

326186

## Wire Transfer of Funds

WACHOVIA BANK, N.A.

Current Date

11/13/08

Control Number

400124

Domestic or International

DOMESTIC

Non-Replicative or Repetitive

NON-REPETITIVE

Line Number

Amt Verify Cd

N

Verify I.D.

Type (Fed, Book, Other)

FED

Caller

Financial Center or Department

0801097

Request Type (Fax, Phone, Walk in)

WALK-IN

Description 2 (SL)

Execution Date

11/13/08

Domestic Transfer Amount

\$ 470,265.98

Type Currency

Value Date

Foreign Amount

Exchange Rate

Contract Number / Provided By

Foreign Currency Transfer Amount

U.S. Dollar Amount

\$

Name

Check One ☐ Internal ☒ Customer Initiated

Org

75

Account Number

1010208551201

ROGER M PESKIN

Address

51 EAST WALL ST BETHLEHEM PA

City/State/Zip/Country

18018

ID 29511924

ID Source PA

ID Type DL

Expiration Date 110120

Name

JPMORGAN CHASE BANK, NA

Address

40 WALL ST

City/State/Zip/Country

NEW YORK NY 10015

Advice NONE

(No Phone Advice Required. Credit and Phone Advice, Notify and Pay, Pay Upon Proper I.D.)

R/T Number

021000021

Name

BERNARD L. MADOFF INVEST SECURITIES

Address

885 THIRD AVE

City/State/Zip/Country

NEW YORK NY 10022

Other Payment Information

FBO ROGER PESKIN AND DIANE PESKIN ACCT NO 1 CM948 3 0

Org

Account Number

140 081 703

Beneficiary Payment  
Information

CHARGE

Fee Method

(Waive/Charge)

## Customer Contract

All of the above information is complete and correct and provided to Wachovia Bank, N.A. or to Wachovia Bank of Delaware, N.A. (each, the "Bank") for it to implement a wire transfer of funds from my account. The Bank's acceptance and execution of my wire transfer transaction is subject to the Terms and Conditions contained in this Wire Transfer of Funds Request. My signature below evidences that I have received a complete copy of this Request, and that I have received the Deposit Agreement.

X attached

Customer Signature

X 11/13/2008

Date